

FIRE BOARD OF APPEALS AGENDA



MEETING DATE February 9, 2018

TIME: 8:30 A.M.

**LOCATION: Pikes Peak Regional Building Department
2880 International Circle – Hearing Room**

CALL TO ORDER

ADMINISTRATIVE

1. Review of Previous Meeting's Minutes

Fire Board of Appeals Meeting Minutes dated January 12, 2018

2. Contractor Licensing

A. Fire Alarm Contractor (FAC) B

- i. Name of Company: APOY Alar Systems, LLC
Owner: Jennifer Riese
Licensee: Joshua L. Swift
RME: Joshua L. Swift
- ii. Name of Company: Carlton Electric, Inc.
Principal Officer: Albert Carlton, CEO-Director
Licensee: Kevin C. Noonan
RME: Kevin C. Noonan

B. Fire Suppression Contractor (FSC) B

- i. Name of Company: Marmic Fire & Safety Co.
Principal Officer: Michael Teeter, President
Licensee: William A. Day
RME: Stephen M. Mulhall

ADJOURN

Respectfully submitted,


Brett T. Lacey, Fire Marshal
Secretary to Fire Board of Appeals

PIKES PEAK REGIONAL BUILDING DEPARTMENT

Fire Alarm Contractor License Application

It is requested that the Fire Board of Appeals of the Colorado Springs Fire Department consider this application for the state license in compliance with the Pikes Peak Regional Building Code.

RBD USE ONLY

Date 1-18-2018

Initial se

Receipt # 1477058

RBD #

FIRE ALARM CONTRACTOR LICENSE REQUESTED (check one)

☐ FAC-A ☐ FAC-B

Business Information

Type of Entity (check one) ☐ Individual ☐ Partnership ☐ Corporation ☒ LLC

Business Name: APOY Alarm Systems LLC

(The business name is the name that will appear on the license and is the actual name under which the contracting business will operate.)

State of Colorado Business License Number: 20161742165

Business Address: 5424 N Buckskin Pass Dr

Street Address

Apartment/Unit #

Colorado Springs

CO

80917

City

State

ZIP Code

Business Phone: 719-373-2448

Business Email: apoyalarmsystems@gmail.com

Business Fax: N/A

Business Website: N/A

Company's Principal Officers, Partners or Owners

Name: Jennifer Riese

Title: Owner

Name: _____

Title: _____

1. Number of years company has operated as a contractor? (if new, write "new") new

2. Type of work performed? (check one or both, if applicable) ☐ Residential ☒ Commercial

3. Has the company ever been named in or responsible for any entered and unsatisfied judgments, liens, and/or claims against them in which the company was the contractor? ☐ Yes ☒ No If yes, Explain _____

4. Has the company been a defendant in a collection action court case? ☐ Yes ☒ No If yes, Explain _____

5. Has the company ever declared bankruptcy? ☐ Yes ☒ No If yes, Explain _____

6. Has the company ever had a license suspended or revoked? ☐ Yes ☒ No If yes, Explain _____

7. Has the company ever defaulted on a contract? ☐ Yes ☒ No If yes, Explain _____

Licenses held by the Company

Jurisdiction - License type and number

Jurisdiction- License type and number

<u>N/A</u>	

Project History (List projects in which this company worked as the contractor.)

1. Project Street Address: Colorado Springs Utilities SDS Plant

Type of work (check one) ☐ Residential ☒ Commercial

Cost: \$54,600 Date: 2015 Your position: installer

Describe Job in detail: Install complete fa system with multiple releasing panels

2. Project Street Address: Denver West Marriott 1717 Denver West Blvd, Golden, CO 80401

Type of work (check one) ☐ Residential ☒ Commercial

Cost: 115,450 Date: 2015 Your position: installer

Describe Job in detail: Install complete fa system

3. Project Street Address: BMW of Denver 1040 S Colorado Blvd, Denver, CO 80246

Type of work (check one) ☐ Residential ☒ Commercial

Cost: 35,360 Date: 2016 Your position: installer

Describe Job in detail: Install complete fa system

4. Project Street Address: Ray Nixon Power Plant

Type of work (check one) ☐ Residential ☒ Commercial

Cost: 10,390 Date: 2016 Your position: installer

Describe Job in detail: Install linear heat detection/open deluge suppression release

5. Project Street Address: Deloitte 1601 Wewatta St, Denver, CO 80202

Type of work (check one) ☐ Residential ☒ Commercial

Cost: 36,875 Date: 2017 Your position: installer

Describe Job in detail: Install complete fa system

CERTIFICATION (The following declaration is to be signed by the **principal officer of the company**) The undersigned, on behalf of the company, partnership or corporation, does hereby declare and warrant that the "examinee" for a contractor's license named herein has the express authority to bind the company, partnership, or corporation by this application; and further, the company does hereby agree to abide by the ordinances and regulations promulgated by the city of Colorado Springs, El Paso County, and those adopted by the municipal entities within El Paso County in regard to any work which may be performed by our company pursuant to the contractor license for which this application is made.

Print name and title (owner, principal or manager) Jennifer Riese, Owner

Signature: 

Date: 1-17-18

Responsible Managing Employee (RME) Information

Legal Name: Swift Joshua L
Last First M.I.

Date of Birth: Social Security Number:

Address:
Street Address Apartment/Unit #
Colorado Springs CO
City State ZIP Code

Phone: Fax: N/A Email: jswifty2006@aol.com

1. What is your area of expertise in the industry? Project Management/Fire Alarm Installation

2. How long have you worked in the industry? 11 years

3. What is your affiliation with the company? (Owner, partner, employee, etc.) employee

4. Have you ever been convicted of a misdemeanor or felony? ☐ Yes ☒ No If yes, Explain

5. Have you had a license suspended or revoked? ☐ Yes ☒ No If yes, Explain

6. I, the undersigned, do hereby submit application for the stated contractor's license as the RME (Responsible Managing Employee) or Licensee for the firm named herein. I do hereby expressly represent, and warrant, that I am acting in capacity of the RME/Licensee of said firm; and I hereby agree to accept the responsibilities for said company's and my own actions in connection with the contractor's license that may be granted. ☒ Yes ☐ No

Certifications

NICET #	NICET Level	Expires
124501	Fire Alarm Systems II	12/01/2017
P.E. #	Issued	Expires
D.O.T. #	Issued	Expires

Work History

Company	Position	To	From
APOY Alarm Systems	Project Manager	Current	2017
SS Electrical Services	Project Manager	2017	2014
Simplex Grinnell	Fire Alarm Installer	2014	2006

CERTIFICATION (The following declaration is to be signed by the RME) Pikes Peak Regional Building Department requires all persons seeking a license to undergo a Criminal Background Check. I hereby authorize Pikes Peak Regional Building Department to perform a Criminal Background Check utilizing information provided on this application. I agree and understand Pikes Peak Regional Building Department may deny me a license after reviewing my Criminal Background Check. If any information provided on this application is untrue, license granted to me is automatically revoked.

Print name & title (RME): Joshua L. Swift, Project Manager

Signature of (RME):  Date: 1-12-18

Licensee Information

Legal Name: Swift Joshua L
Last First M.I.

Date of Birth: Social Security Number:

Address:

Street Address *Apartment/Unit #*

Colorado Springs	CO	<div></div>
City	State	ZIP Code

Phone: [REDACTED] Fax: N/A Email: jswifty2006@aol.com

1. What is your area of expertise in the industry? Project Management/Fire Alarm Installation

2. How long have you worked in the industry? 11 years

3. What is your affiliation with the company? (Owner, partner, employee, etc.) employee

4. Have you ever been convicted of a misdemeanor or felony? ☐ Yes ☒ No If yes, Explain _____

5. Have you had a license suspended or revoked? ☐ Yes ☒ No If yes, Explain _____

6. The examinee understands that direct supervision and control includes any one or a combination of the following activities: supervising, managing construction activities by making technical and administrative decisions, checking jobs for proper workmanship, or direct supervision on job sites. Will you, as the qualifying individual, perform one or more of these duties? ☒ Yes ☐ No

Certifications

NICET #	NICET Level	Expires
124501	Fire Alarm Systems II	12/01/2017

P.E. #	Issued	Expires

D.O.T. #	Issued	Expires

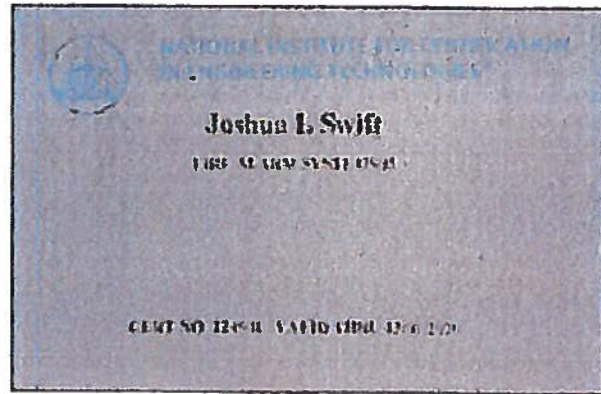
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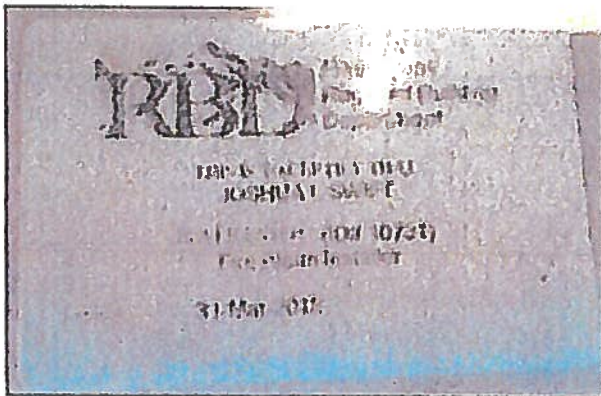
CERTIFICATION (The following declaration is to be signed by the Licensee) Pikes Peak Regional Building Department requires all persons seeking a license to undergo a Criminal Background Check. I hereby authorize Pikes Peak Regional Building Department to perform a Criminal Background Check utilizing information provided on this application. I agree and understand Pikes Peak Regional Building Department may deny me a license after reviewing my Criminal Background Check. If any information provided on this application is untrue, license granted to me is automatically revoked.

Print name & title (Licensee): Joshua L. Swift, Project Manager

Signature of (Licensee): [Signature] Date: 1-12-18



124501



JOSH SWIFT

2122 Olympic Drive
Colorado Springs, Colorado, 80910
Phone: (719) 272-1786
Email: jswifty2006@aol.com

QUALIFICATIONS: Over ten years of experience in a fast paced environment. Job responsibilities included: pulling wire to correct locations and making it aesthetically pleasing. Coordinating with other trades to get job done on time. Ensuring customer satisfaction in all aspects of every job.

EMPLOYMENT

2005-2006 Courtesy Clerk, Safeway, Inc.

Greet customers in a polite manner; provide fast bagger service, provided customers with help loading groceries into their vehicles. Gather buggies and return inside store, cashier experience. Customer Service desk includes using the Western Union computer, money order, lotto ticket, and tobacco purchases, returned merchandise, and handling customer complaints. Stock shelves quickly and efficiently. Expertly work gas station, handling money, tobacco and lotto sales.

2006-2014 SimplexGrinnell – Fire Alarm Installer

Installing complete fire alarm systems, in a timely and professional manner coordinating with other trades to ensure the projects are done on time, as well as running crews of guys, keeping them all focused and on task. Obtaining NICET Level 2. Attending training to program all SimplexGrinnell fire alarm panels. Troubleshooting troubles on fire alarm panels, both on my own installs and as a service technician. Experience in the inspection department, testing existing systems making sure that all systems are kept up to current codes. Driving a labeled company vehicle for 8 years and only receiving one negative "how am I driving" call in. Teaching apprentices how to correct work on fire alarm systems and construction sites, in addition to teaching them codes and the correct way to install wire and devices.

2014-Current Project Coordinator – SS electrical services

Being the lead on most projects that we start. Meeting with General contractors and other trades to ensure good start times and making sure we are not interrupting anybody else's work process. Continually running multiple crews to ensure all projects get done at the required times. Consistent communication with contractors and employees, letting them know the status of projects and what is left to be completed.

VOLUNTEER WORK

- July 2006 Mobility Project - Mazatlan
Worked with The Mobility Project for two weeks in Mazatlan, Mexico. Handed out thirty wheelchairs over two days, Feeding approximately sixty children breakfast on two separate occasions and approximately forty children on one occasion. Visited a prison and performed a church service in the maximum security section and one in the minimum security section as well. Painted three buildings. Renovated and refurbished forty wheelchairs.
- July 2005 Mobility Project – El Salvador
Worked with The Mobility Project for two weeks in San Salvador, El Salvador. Rebuilt three houses that had burned down in separate fires, including scraping charcoal off the walls and putting new roofs on. Handed out over two hundred pounds of food and one hundred pounds of clothing to the people in El Salvador. Visited an orphanage for children and gave them toys, played with them, and loved them. Handed out over thirty wheel chairs in two days. Performed a mime in front of a church audience. Built three P.E.Ts (Personal Energy Transports).



5424 N Buckskin Pass Dr
Colorado Springs, CO 80917
(719) 373-2448
apoyalarmsystems@gmail.com

December 20, 2017

Pikes Peak Regional Building Department
Colorado Springs Fire Department
2880 International Circle
Colorado Springs, CO 80910

RE: Employment Status

To Whom It May Concern,

This letter is to confirm that Joshua L. Swift is a full-time, exclusive employee at APOY Alarm Systems, LLC. Please feel free to contact me with any questions or concerns.

Best Regards,

A handwritten signature in blue ink, appearing to read "Jennifer Riese", with a large, stylized flourish extending from the end.

Jennifer Riese
Owner
APOY Alarm Systems LLC

OFFICE OF THE SECRETARY OF STATE
OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I, Wayne W. Williams, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

APOY Alarm Systems, LLC

is a

Limited Liability Company

formed or registered on 10/31/2016 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20161742165 .

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 12/19/2017 that have been posted, and by documents delivered to this office electronically through 12/20/2017 @ 16:29:06 .

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 12/20/2017 @ 16:29:06 in accordance with applicable law. This certificate is assigned Confirmation Number 10615716 .



Secretary of State of the State of Colorado

*****End of Certificate*****

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, <http://www.sos.state.co.us/biz/CertificateSearchCriteria.do> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, <http://www.sos.state.co.us/> click "Businesses, trademarks, trade names" and select "Frequently Asked Questions."



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

09/12/2017

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Insurance Centers of America Inc 2055 Anglo Drive Suite 200 Colorado Springs CO 80918		CONTACT NAME: Cheryl Renteria PHONE (A/C, No. Ext): (719)528-5400 FAX (A/C, No): (719)528-1564 E-MAIL: cheryl@icainsurance.com ADDRESS:	
INSURED APOY Alarm Systems LLC 5424 N. Buckskin Pass Drive Colorado Springs CO 80917		INSURER(S) AFFORDING COVERAGE INSURER A: Scottsdale Insurance Co. INSURER B: Pinnacle INSURER C: INSURER D: INSURER E: INSURER F:	

COVERAGES	CERTIFICATE NUMBER: 17-18 GL/WC	REVISION NUMBER:
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.		

INSR LTR	TYPE OF INSURANCE	ADOL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		CPS2894739	08/23/2017	08/23/2018	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/OP AGG \$ Included \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$ <input type="checkbox"/>					EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input checked="" type="checkbox"/> Y (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N/A		4204636	09/08/2017	09/01/2018

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

PIKES PEAK REGIONAL BUILDING DEPARTMENT

Fire Alarm Contractor License Application

It is requested that the Fire Board of Appeals of the Colorado Springs Fire Department consider this application for the state license in compliance with the Pikes Peak Regional Building Code.

FIRE ALARM CONTRACTOR LICENSE REQUESTED (Check one)

☐ FAC-A ☒ FAC-B

RBD USE ONLY

Date 1-8-2018
Initial SE
Receipt # 147488
RBD # 12606

Business Information

Type of Entity (Check one) ☐ Individual ☐ Partnership ☒ Corporation ☐ LLC

Business Name: Carlton Electric Inc.
(The business name is the name that will appear on the license and is the actual name under which the contracting business will operate.)

Federal Employer Identification Number: 84-1285005

Business Address: 1284 S. Cherokee St.
Street Address Apartment/Unit #
Denver CO 80223
City State ZIP Code

Business Phone: 303-722-5742 Business Email: _____

Business Fax: 303-722-5749 Business Website: carltonelectric.com

Company's Principal Officers, Partners, or Owners

Name: Albert Carlton Title: CEO-Director

Name: _____ Title: _____

1. Number of years company has operated as a contractor? (If new, write "new") 25 years

2. Type of work performed? (Check one or both, if applicable) ☐ Residential ☒ Commercial

3. Has the company ever been named in or responsible for any entered and unsatisfied judgments, liens, and/or claims against them in which the company was the contractor? ☐ Yes ☒ No If yes, Explain _____

4. Has the company been a defendant in a collection action court case? ☐ Yes ☒ No If yes, Explain _____

5. Has the company ever declared bankruptcy? ☐ Yes ☒ No If yes, Explain _____

6. Has the company ever had a license suspended or revoked? ☐ Yes ☒ No If yes, Explain _____

7. Has the company ever defaulted on a contract? ☐ Yes ☒ No If yes, Explain _____

Licenses held by the Company

Jurisdiction - License type and number	Jurisdiction- License type and number
Colorado sales tax license 02326495-0001	Aurora contractor license 2017 1276180 00 CL
Denver sales tax license 260374	Englewood contractor license 10744
Pikes Peak Regional Bldg Dept 12606	
C&C Denver electrical LIC 17658	

Project History (List projects in which this company worked as the contractor.)

1. Project Street Address: 14401 W 65th Wy Arvada CO

Type of work (check one) ☐ Residential ☒ Commercial

Cost: 220,000 Date: Aug- Dec 2017 Your position: Estimator, project manager

Describe Job in detail: Provide notification upgrades to office and warehouse spaces

2. Project Street Address: 8000 Southpark Terrace Littleton CO

Type of work (check one) ☐ Residential ☒ Commercial

Cost: 40,000 Date: Sept- Oct 2017 Your position: Estimator, project manager

Describe Job in detail: Provide fire alarm coverage in new warehouse addition

3. Project Street Address: 10455 Dawson Dr Lafayette CO

Type of work (check one) ☐ Residential ☒ Commercial

Cost: 305,000 Date: Jan-May 2017 Your position: Estimator, project manager

Describe Job in detail: Provide new networked panels and voice evac notification in 7 campus buildings

4. Project Street Address: 1375 E 20th Ave Denver CO

Type of work (check one) ☐ Residential ☒ Commercial

Cost: 180,000 Date: May-Aug 2015 Your position: Project manager

Describe Job in detail: Provide new fire alarm system complete in 5 story MOB building while occupied

5. Project Street Address: 100 Jefferson County Parkway Golden CO

Type of work (check one) ☐ Residential ☒ Commercial

Cost: 941,000 Date: Oct 2011-Dec 2012 Your position: Project Foreman

Describe Job in detail: Provide new fire alarm system in Jeffco government center. Includes 5 releasing systems, voice evac, Vesda systems, elevator recall, and smoke control

CERTIFICATION (The following declaration is to be signed by the principal officer of the company) The undersigned, on behalf of the company, partnership or corporation, does hereby declare and warrant that the "examinee" for a contractor's license named herein has the express authority to bind the company, partnership, or corporation by this application; and further, the company does hereby agree to abide by the ordinances and regulations promulgated by the city of Colorado Springs, El Paso County, and those adopted by the municipal entities within El Paso County in regard to any work which may be performed by our company pursuant to the contractor license for which this application is made.

Print name and title (owner, principal or manager) Albert Carlton CEO & Director

Signature:  Date: 12-11-17

Licensee Information

Legal Name: Noonan Kevin C
Last First M.I.
 Date of Birth: Social Security Number:
 Address:
City State ZIP Code
 Denver CO
City State ZIP Code
 Phone: Fax: Email: Kevin@carltonelectric.com

1. What is your area of expertise in the industry? Electrical and Fire Alarm
2. How long have you worked in the industry? 17+ years
3. What is your affiliation with the company? (Owner, partner, employee, etc.) Employee
4. Have you ever been convicted of a misdemeanor or felony? ☐ Yes ☒ No If yes, Explain
5. Have you had a license suspended or revoked? ☐ Yes ☒ No If yes, Explain
6. The examinee understands that direct supervision and control includes any one or a combination of the following activities: supervising, managing construction activities by making technical and administrative decisions, checking jobs for proper workmanship, or direct supervision on job sites. Will you, as the qualifying individual, perform one or more of these duties? ☒ Yes ☐ No

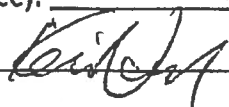
Certifications

NICET #	NICET Level	Expires
146435	Level 2	1-11-2021
P.E. #	Issued	Expires
D.O.T. #	Issued	Expires

Work History

Company	Position	To	From
Carlton Electric	Project manager	Present	Nov 2013
Carlton Electric	Foreman	Nov 2013	Dec 2004

CERTIFICATION (The following declaration is to be signed by the Licensee) Pikes Peak Regional Building Department requires all persons seeking a license to undergo a Criminal Background Check. I hereby authorize Pikes Peak Regional Building Department to perform a Criminal Background Check utilizing information provided on this application. I agree and understand Pikes Peak Regional Building Department may deny me a license after reviewing my Criminal Background Check. If any information provided on this application is untrue, license granted to me is automatically revoked.

Print name & title (Licensee): Kevin Noonan Project Manager
 Signature of (Licensee):  Date: 12-11-17

Responsible Managing Employee (RME) Information

Legal Name: Noonan Kevin C
Last First M.I.
 Date of Birth: [REDACTED] Social Security Number: [REDACTED]
 Address: [REDACTED] [REDACTED] [REDACTED]
Street Address
 [REDACTED] [REDACTED] 80227
City State ZIP Code
 Phone: [REDACTED] Fax: [REDACTED] Email: Kevin@carltonelectric.com

1. What is your area of expertise in the industry? Electrical and Fire Alarm
 2. How long have you worked in the industry? 17+ years
 3. What is your affiliation with the company? (Owner, partner, employee, etc.) Employee
 4. Have you ever been convicted of a misdemeanor or felony? ☐ Yes ☒ No If yes, Explain _____
 5. Have you had a license suspended or revoked? ☐ Yes ☒ No If yes, Explain _____
 6. I, the undersigned, do hereby submit application for the stated contractor's license as the RME (Responsible Managing Employee) or Licensee for the firm named herein. I do hereby expressly represent, and warrant, that I am acting in capacity of the RME/Licensee of said firm; and I hereby agree to accept the responsibilities for said company's and my own actions in connection with the contractor's license that may be granted. ☒ Yes ☐ No

Certifications

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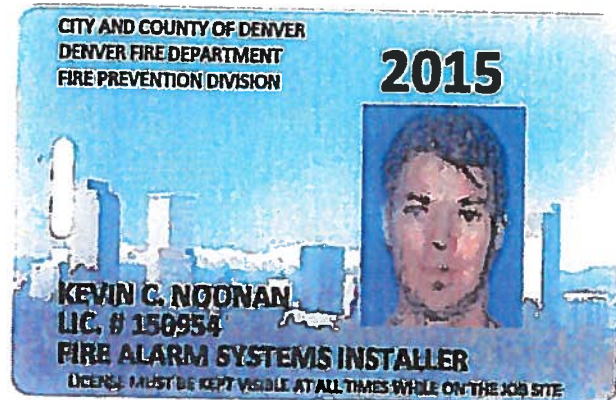
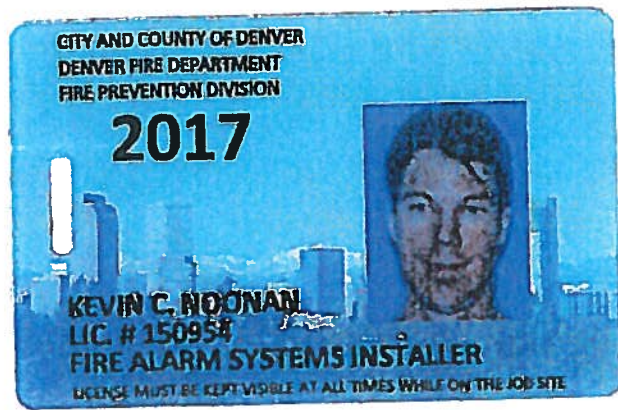
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Print name & title (RME): Kevin Noonan Project Manager

Signature of (RME): [Signature] Date: 12-11-17





**NATIONAL INSTITUTE FOR CERTIFICATION
IN ENGINEERING TECHNOLOGIES®**

Providing Certification Programs Since 1961



Approval Letter

Name: Kevin Noonan
Date of Award: December 5, 2017
Certification Number: 146435
Certification Expire Date: 01/01/2021

It is my pleasure to inform you that you have been awarded certification as follows:

FIRE PROTECTION ENGINEERING TECHNOLOGY/FIRE ALARM SYSTEMS/LEVEL II

If this is your first award of NICET certification, the expiration date shown under your certification number establishes your three-year recertification cycle. If this is an upgraded certification or a certification in a new technical area, your three-year recertification cycle remains the same as previously established. Please refer to NICET Policy No. 30, *Continuing Professional Development*, for rules governing recertification.

Prior to removing the wallet card from this letter, we advise that you make a copy of the letter for your files as the complete letter may be required as proof of certification.

The interest you have shown in your career development by obtaining professional recognition and status through certification is most commendable. On behalf of the Board of Governors, please accept our congratulations and best wishes.

Very truly yours,

Michael A. Clark
General Manager

remove card slowly



**NATIONAL INSTITUTE FOR CERTIFICATION
IN ENGINEERING TECHNOLOGIES®**

Kevin Noonan
FIRE ALARM SYSTEMS/II

Kevin Noonan
Carlton Electric
1284 S Cherokee St
Denver, CO 80223

CERT NO. 146435 VALID THRU 01/01/2021

Kevin Noonan
3041 S Harlan St Denver, Colorado
Project Manager

QUALIFICATIONS

I have 13 years of experience with my current employer, and 17 years of experience total as an electrician. I have been licensed by the state for 11 years and licensed by the Denver Fire Department for 9 years to install/ inspect/ modify fire alarm systems. I Have 4 years of experience as a project manager handling the day to day operations of numerous contract projects and service work electricians.

PROFESSIONAL EXPERIENCE

Project Manager, Estimator, Sales

Carlton Electric, Inc.

11/2013 – Present

Estimated and managed Projects ranging up to \$300,000. Responsibilities include management of the day to day operations of 4-8 service truck electricians working on projects ranging from service calls to larger install projects, estimating sales, and project scheduling. Responsible for estimating projects ranging from \$1000 to \$250,000.00 using Accubid Estimating Software. Create contract project billings and schedules of values. Further fire alarm history on second page.

Field Foreman

Carlton Electric, Inc.

12/2007 – 11/2013

Managed the installation of Fire Alarm and electrical projects ranging from \$10,000 to \$950,000. Major projects included: USPS Western Area Office fire alarm replacement, Jefferson County Courts fire alarm replacement, State of Colorado Human Services fire alarm replacement, multiple Kaiser MOB fire alarm replacements. Further fire alarm history on second page.

Apprentice Electrician – 4th year

Carlton Electric, Inc.

12/2006 – 12/2007

Fourth-year Apprentice Electrician involved in electrical and fire alarm installations.

Apprentice Electrician – 3rd year

Carlton Electric, Inc.

12/2004 – 12/2006

Third-year Apprentice Electrician involved in electrical and fire alarm installations.

Apprentice Electrician – 1st & 2nd year

Hinton Electric, Encompass Electric

6/2001 – 11/2004

First- and second-year Apprentice Electrician involved in electrical and fire alarm installations

EDUCATION

Emerging Leaders IECRM

2015- 2016

Bear Creek High School Lakewood, CO

1994- 1998

LICENSES/CERTIFICATION

State of Colorado, Journeyman Electrician License #110348

NICET Fire Alarm Level II #224821

Denver Fire Department Journeyman License #150954

City of Aurora Fire Alarm license #2015-933506

Kevin Noonan
3041 S Harlan St Denver, Colorado
Project Manager/ Fire alarm installation history

I have been in the electrical industry for 17 years and have worked on a variety of fire alarm projects from new construction to system upgrades and full retrofit systems in occupied buildings. I have been at my current employer for the past 13 years.

Fire Alarm Management Experience

- LivaNova office/ warehouse upgrades- \$225k
Retrofit installation of new Notifier voice evacuation panels and circuits
- Alexander Dawson Campus upgrades- \$305k
Retrofit installation of new Notifier voice evacuation notification panels and circuits
- Republic National Distributing Center- \$65k
Full installation of new office area Notifier fire alarm and voice evacuation panels and circuits
Demoed existing fire alarm system
- Kaiser Skyline MOB- \$190k
Full installation of new Notifier fire alarm throughout 5 story MOB
Demoed existing fire alarm system
- Kaiser Centerpoint MOB- \$120k
Complete installation of Notifier fire alarm system
Demoed existing fire alarm system

Fire Alarm Installation Experience

- Western Area Offices Post Office building
Complete installation of Notifier fire alarm in 10 story building
Demoed existing system
- Jefferson County Government Center
Complete installation of Simplex Voice Evacuation fire alarm system
- State of Colorado Human Services Building
Complete installation of Notifier Smoke Control fire alarm system
- XCEL, Lipan Site
Full installation of FCI-Gamewell
Demoed existing fire alarm system
- XCEL Mass Distribution Center, Henderson Site
Full installation of FCI-Gamewell
Demoed existing fire alarm system
- Lockheed Martin Deer Creek Facility
Duct Detector upgrades
Tied into existing ESP system
- Kaiser Southwest Facility
Complete installation of new Notifier fire alarm system
- Kaiser Waterpark Facility
Complete installation of new Siemens fire alarm system
- Kaiser Longmont Facility
Complete installation of new Siemens fire alarm system
- Kaiser Smokey Hill Facility
Complete installation of new Siemens fire alarm system
- Holiday Inn DIA
Complete notification upgrade to Notifier voice evacuation
- Niwot High School & CDC
Complete Notifier fire alarm installation
- Franklin Elementary School
Remodel portions of existing fire alarm system
Add new administration area to existing system
- Mountain City Meat Company
Remodel fire alarm upgrades
- University of Colorado Warehouse
New construction

- Notifier fire alarm installation
- Gates Fluid Power and Technologies Facility
New Construction
Notifier fire alarm installation

References

- Larry Cleveland (Owner)
Fire Detection Systems, LLC
1351 W. 121st Ave.
Westminister, CO 80234
303-438-8088
- Bruce Hufford (Owner)
Fire Inspection Services, LLC
11919 W. I-70 Frontage Road N.
Unit 127
Wheat Ridge, CO 80033
303-432-8370
- Tami Lynn Holley (Owner)
Tami Lynn Holley, PE, LLC
6638 W. Ottawa Ave., Suite 250
Littleton, CO 80128
720-365-2999

PIKES PEAK REGIONAL BUILDING DEPARTMENT**Contractor -- CARLTON ELECTRIC, INC. (12606)****Status: ACTIVE****Type of Business: Corporation****In Business Since: 06-Jun-1994**

1284 S CHEROKEE ST
 DENVER, CO 80223
 Phone: (303) 722-5742
 Fax: (303) 722-5749
 Officer #1: CARLTON, ALBERT J.

LICENSES

Last Name	First Name	D	T	Cat	Subcat	Phone	Expires	Renewed
CARLTON	ALBERT	E	A			(303) 722-5742	10/31/2018	10/06/2017

OBLIGATIONS

T	Agency	Reference #	Expires
C - Certification	STATE OF COLORADO	ME 2463	09/30/2020
C - Certification	STATE OF COLORADO	EC 3823	09/30/2020
L - Liability	CINCINNATI INSURANCE COMPANY	EPP0367985	01/01/2019
W - Workers Comp.	PINNACOL ASSURANCE COMPANY	4088285	01/01/2018

ASSOCIATES

Associate	Permits
ALLEN, FRANK	0
CARLTON, ALTA	0
ESPARZA, RICARDO	1
FULKMAN, HAROLD (HAL)	0
LINGO, PAUL	0
MARTIN, CARL	12
MARTINEZ, BEN	0
MARTINEZ, BRENDA	0
MARTINEZ, EDWARD A.	1
MCCADDEN, ROB	0
NOONAN, KEVIN-PROJECT MANAGER	0
NOVAK, JOE	0
OLIN, MIKE	0
WOLF, MARK	3
YOUNG, SUE	0



CARLTON ELECTRIC, INC. 1284 S. CHEROKEE ST. DENVER, CO 80223 PHONE 303-722-5742 FAX 303-722-5749

December 6, 2017

To Whom It May Concern:

Kevin Noonan is a full time employee with Carlton Electric Inc.

Albert Carlton

CEO Director

OFFICE OF THE SECRETARY OF STATE
OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I, Wayne W. Williams, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

CARLTON ELECTRIC, INC.

is a

Corporation

formed or registered on 08/19/1994 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 19941093592 .

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 12/04/2017 that have been posted, and by documents delivered to this office electronically through 12/06/2017 @ 08:59:22 .

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 12/06/2017 @ 08:59:22 in accordance with applicable law. This certificate is assigned Confirmation Number 10587890 .



A handwritten signature in blue ink, reading 'Wayne W. Williams', is written over a horizontal line.

Secretary of State of the State of Colorado

*****End of Certificate*****

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, <http://www.sos.state.co.us/biz/CertificateSearchCriteria.do> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, <http://www.sos.state.co.us/> click "Businesses, trademarks, trade names" and select "Frequently Asked Questions."

Client#: 33339

CARELEPC

ACORD™

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
12/30/2016

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Holmes Murphy -Colorado 7600 East Orchard Rd, Ste 330 South Greenwood Village, CO 80111		CONTACT NAME: PHONE (A/C, No, Ext): 515 223-6800 FAX (A/C, No): E-MAIL ADDRESS: INSURER(S) AFFORDING COVERAGE INSURER A: Cincinnati Insurance Company INSURER B: Pinnacle Assurance Company INSURER C: INSURER D: INSURER E: INSURER F:		NAIC # 10677 41190
INSURED Carlton Electric, Inc. 1284 South Cherokee Street Denver, CO 80223				

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.


INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCLR <input checked="" type="checkbox"/> PD Ded:500 GEN'L AGGREGATE LIMIT APPLIES PER <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:	X	X	EPP0367985	01/01/2016	01/01/2019	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$100,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 \$
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	X	X	EBA0367985	01/01/2017	01/01/2018	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input type="checkbox"/> RETENTION S <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE			EPP0367985	01/01/2016	01/01/2019	EACH OCCURRENCE \$4,000,000 AGGREGATE \$4,000,000 \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		X	4088285	01/01/2017	01/01/2018	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E L EACH ACCIDENT \$500,000 E L DISEASE - EA EMPLOYEE \$500,000 E L DISEASE - POLICY LIMIT \$500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Project Description: SAMPLE Purposes Only Project Number: 1234 The following are Additional Insureds as respects General Liability only if required by written contract and coverage applies only as respects ongoing operations performed by the Insured for the Additional Insureds. Additional Insureds: SAMPLE Company All coverage terms, conditions and exclusions of the policy apply. The Additional Insured endorsement which is referenced above under Type of Insurance-General Liability is attached.

CERTIFICATE HOLDER

CANCELLATION

SAMPLE with AI Endorsement Information Purposes Only 1284 South Cherokee Denver, CO 80223-0000	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
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PIKES PEAK REGIONAL BUILDING DEPARTMENT

Fire Suppression Contractor License Application

It is requested that the Fire Board of Appeals of the Colorado Springs Fire Department consider this application for the state license in compliance with the Pike's Peak Regional Building Code.



RBD USE ONLY

Date 12-26-2017
Initial SE
Receipt # 1472926
RBD # 21587

FIRE SUPPRESSION CONTRACTOR LICENSE REQUESTED (Check one)

☐ FSC-A ☒ FSC-B ☐ FSC-C ☐ FSC-D ☐ FSC-H ☐ FSC-M

Business Information

Type of Entity (Check one) ☐ Individual ☐ Partnership ☒ Corporation ☐ LLC

Business Name: MARMIL FIRE & SAFETY CO.

(The business name is the name that will appear on the license and is the actual name under which the contracting business will operate.)

Federal Employer Identification Number: 43-1866691

Business Address: 1014 WALL

Street Address

Apartment/Unit #

JOPLIN

MO

64801

City

State

ZIP Code

918-510-6013

Business Phone: ~~888-462-7642~~

Business Email: STEVE @ MARMILFIRE.COM

Business Fax: N/A

Business Website: WWW.MARMILFIRE.COM

Company's Principal Officers, Partners, or Owners

Name: MICHAEL TEEGER Title: PRESIDENT

Name: _____ Title: _____

Name: _____ Title: _____

1. Number of years the company has operated as a contractor? (If new, write "new") 18 years

2. What is the company's area of specialties? FIRE SUPPRESSION (PRE-ENGINEERED, CALCULATED), SPRINKLER, ALARM, PUMP

Type of work performed? (Check one or both, if applicable)

☐ Residential ☒ Commercial

3. Has the company ever been named in or responsible for any entered and unsatisfied judgments, liens, and/or claims against them in which the company was the contractor? ☐ Yes ☒ No If yes, Explain _____

4. Has the company been a defendant in a collection action court case? ☐ Yes ☒ No If yes, Explain _____

5. Has the company ever declared bankruptcy? ☐ Yes ☒ No If yes, Explain _____

6. Has the company ever had a license suspended or revoked? ☐ Yes ☒ No If yes, Explain _____

7. Has the company ever defaulted on a contract? ☐ Yes ☒ No If yes, Explain _____

Project History (List projects in which this company worked as the contractor.)

1. Project Street Address: SEE ATTACHED

Type of work (check one) ☐ Residential ☒ Commercial

Cost: _____ Date: _____ Your position: _____

Describe Job in detail: FIRE SUPPRESSION

2. Project Street Address: SEE ATTACHED

Type of work (check one) ☐ Residential ☒ Commercial

Cost: _____ Date: _____ Your position: _____

Describe Job in detail: FIRE SUPPRESSION

3. Project Street Address: SEE ATTACHED

Type of work (check one) ☐ Residential ☒ Commercial

Cost: _____ Date: _____ Your position: _____

Describe Job in detail: FIRE SUPPRESSION

4. Project Street Address: SEE ATTACHED

Type of work (check one) ☐ Residential ☒ Commercial

Cost: _____ Date: _____ Your position: _____

Describe Job in detail: FIRE SUPPRESSION

5. Project Street Address: SEE ATTACHED

Type of work (check one) ☐ Residential ☒ Commercial

Cost: _____ Date: _____ Your position: _____

Describe Job in detail: FIRE SUPPRESSION

CERTIFICATION (The following declaration is to be signed by the **principal officer of the company**) The undersigned, on behalf of the company, partnership or corporation, does hereby declare and warrant that the "examinee" for a contractor's license named herein has the express authority to bind the company, partnership, or corporation by this application; and further, the company does hereby agree to abide by the ordinances and regulations promulgated by the City of Colorado Springs, El Paso County, and those adopted by the municipal entities within El Paso County in regard to any work which may be performed by our company pursuant to the contractor license for which this application is made.

Print Name and title (owner, principal or manager) Michael Teeter President

Signature: Michael Teeter

Date: 12-14-17

Responsible Managing Employee (RME) Information

Legal Name: MULHAU STEPHEN M
Last First M.I.

Date of Birth: [REDACTED] Social Security Number: [REDACTED]

Address: [REDACTED] Street Address [REDACTED] Apartment/Unit # [REDACTED]
[REDACTED] Tulsa City OK State [REDACTED] ZIP Code

Phone: [REDACTED] Fax: N/A Email: STEVE@MARMILFIRE.COM

1. What is your area of expertise in the industry? FIRE-ENGINEING & ENGINEERING VEHICLE FIRE SUPPRESSION SYSTEMS
2. How long have you worked in the industry? 16 YEARS
3. What is your affiliation with the company? (Owner, partner, employee, etc.) GENERAL MANAGER / KANSAS & OKLAHOMA
4. Have you ever been convicted of a misdemeanor or felony? ☐ Yes ☒ No If yes, Explain _____
5. Have you had a license suspended or revoked? ☐ Yes ☒ No If yes, Explain _____
6. I, the undersigned, do hereby submit application for the stated contractor's license as the RME (Responsible Managing Employee) or Licensee for the firm named herein. I do hereby expressly represent, and warrant, that I am acting in capacity of the RME/Licensee of said firm; and I hereby agree to accept the responsibilities for said company's and my own actions in connection with the contractor's license that may be granted. ☒ Yes ☐ No

Certifications

NICET #	NICET Level	Expires
P.E. #	Issued	Expires
D.O.T. #	Issued	Expires
B161		

Work History

Company	Position	To	From
MARMIC FIRE & SAFETY	LIBRARIAN MANAGER	CURRENT	02/2002

CERTIFICATION (The following declaration is to be signed by the RME) Pikes Peak Regional Building Department requires all persons seeking a license to undergo a Criminal Background Check. I hereby authorize Pikes Peak Regional Building Department to perform a Criminal Background Check utilizing information provided on this application. I agree and understand Pikes Peak Regional Building Department may deny me a license after reviewing my Criminal Background Check. If any information provided on this application is untrue, license granted to me is automatically revoked.

Print name & title (RME): STEVE MULLALL, GENERAL MANAGER

Signature of (RME): [Signature] Date: 12-12-2017

Licensee Information

Legal Name: DAI WEL A
Last First M.I.

Date of Birth: [REDACTED] Social Security Number: [REDACTED]

Address: _____
Street Address Apartment/Unit #

[illegible]

Phone: [REDACTED] Fax: [REDACTED] Email: WDAY@MAXMEC.FIAT.COM

1. What is your area of expertise in the industry? WOOD SUPPRESSION / FIRE EXTINGUISHING /
2. How long have you worked in the industry? 2 YEARS
3. What is your affiliation with the company? (Owner, partner, employee, etc.) Employee
4. Have you ever been convicted of a misdemeanor or felony? ☐ Yes ☒ No If yes, Explain _____
5. Have you had a license suspended or revoked? ☐ Yes ☒ No If yes, Explain _____
6. The examinee understands that direct supervision and control includes any one or a combination of the following activities: supervising, managing construction activities by making technical and administrative decisions, checking jobs for proper workmanship, or direct supervision on job sites. Will you, as the qualifying individual, perform one or more of these duties? ☒ Yes ☐ No

Certifications

NICET #	NICET Level	Expires
P.E. #	Issued	Expires
D.O.T. #	Issued	Expires

Work History

Company	Position	To	From
PIZZA HUT	MANAGER	2014	2008
DESH NETWORK	FIELD SERVICE TECH.	2015	2014
MALMIE FIRE SAFETY	INSPECTIONS MANAGER	2015 PRESENT	2015

CERTIFICATION (The following declaration is to be signed by the Licensee) Pikes Peak Regional Building Department requires all persons seeking a license to undergo a Criminal Background Check. I hereby authorize Pikes Peak Regional Building Department to perform a Criminal Background Check utilizing information provided on this application. I agree and understand Pikes Peak Regional Building Department may deny me a license after reviewing my Criminal Background Check. If any information provided on this application is untrue, license granted to me is automatically revoked.

Print name & title (Licensee): WILL DAY - INSPECTIONS MANAGER

Signature of (Licensee): Will Long Date: 12-13-17



MARMIC FIRE & SAFETY

Toll Free (877) 906-1996
3168 S. 108th East Ave., Suite 390
Tulsa, OK 74146
OK Lic. 447

12-13-2017

Pikes Peak Regional Building Department

Re: Status of RME Applicant - Stephen Mulhall

To whom it may concern,

The RME applicant for our company, Stephen Mulhall, has been a full time employee consecutively since February of 2002. With his experience and certifications, he should meet all requirements for RME as required for FSC-B. If you have any questions, please feel free to call me at 877-906-1996.

Thank you,

Michael Teeter
President
Marmic Fire & Safety Co.



MARMIC FIRE & SAFETY

**Toll Free (877) 906-1996
3168 S. 108th East Ave., Suite 390
Tulsa, OK 74146
OK Lic. 447**

12-13-2017

Pikes Peak Regional Building Department

Re: Employee Termination - Dwayne Holly

To whom it may concern:

I am writing to inform you that Dwayne Holly is no longer with our company. We are submitting Steve Mulhall as the RME for our license. The packet is accompanying.

If you have any questions, please feel free to let me know.

Thank you,

Steve Mulhall, OK 1619
Marmic Fire & Safety
918-510-6013

Oklahoma State Fire Marshal
Fire Extinguisher Licensing Act

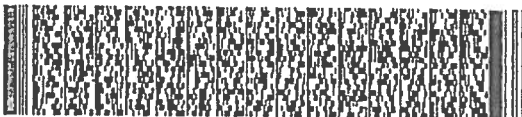
This is to certify that:

Stephen Mulhall

License No. # 1619
is licensed to practice from:
10/1/17 through 9/30/18
(see reverse of this card for
Fire Extinguisher endorsements)



Robert Duke
State Fire Marshal



Class: D-All vehicles or combination of vehicles except A, B and C

Restr: 1-Corrective lenses

Endors: M-Motorcycle

Notify in writing, Driver License Services, P.O.
Box 11415, Oklahoma City, OK 73136-0415
within 30 days of any name or address change

www.dps.state.ok.us

COUNTY: 49
\$24.00

- | | | |
|---|--|--------------------------------------|
| <input checked="" type="checkbox"/> Fire Extinguisher | <input checked="" type="checkbox"/> Pre-Engineered Systems | <input type="checkbox"/> Engineered |
| <input checked="" type="checkbox"/> Q.A. | <input checked="" type="checkbox"/> Q.A. | <input type="checkbox"/> Q.A. |
| <input type="checkbox"/> Tech | <input type="checkbox"/> Tech | <input type="checkbox"/> Designer |
| <input type="checkbox"/> Salesperson | <input type="checkbox"/> Salesperson | <input type="checkbox"/> Tech |
| <input type="checkbox"/> Trainee | <input type="checkbox"/> Trainee | <input type="checkbox"/> Salesperson |
| | | <input type="checkbox"/> Trainee |

Title 59 O.S. Supp. 2007, Section 1820.1 et seq.



MARMIC FIRE & SAFETY

Toll Free (877) 906-1996
3168 S. 108th East Ave., Suite 390
Tulsa, OK 74146
OK Lic. 447

12-12-2017

Pike Peak Regional Building Department
2880 International Circle,
Colorado Springs, CO 80910
Tulsa, OK 74145

Re: RME Resume

Stephen M. Mulhall

02/2002-Current Marmic Fire & Safety Co Inc.

02/2002-12/2007 - Pre-Engineered Technician and Service Manager

Serviced and installed pre-engineered fire suppression systems to include kitchen suppression, paint spray booth suppression systems, special hazard suppression systems, and vehicle suppression systems. Manage pre-engineered service and inspection department and employees.

12/2007-11/2010 - Branch Manager - Managed Branch Operations in Parsons, KS

11/2010 to Current - District General Manager - Manage Operations in 4 offices in Kansas and Oklahoma

APPLICABLE CERTIFICATIONS

State of Oklahoma - Qualified Agent - Portable Extinguishers

State of Oklahoma - Qualified Agent - Pre-Engineered Systems

Firetrace

Ansul Checkfire SC-N/MP-N

Ansul Checkfire 110/210

Ansul IND-X

Ansul LT-A-101 Vehicle Systems

Ansul LVS Vehicle Systems

Ansul Piranha

Ansul R-102

Ansul NFPA 10 - Portable Extinguisher and Maintenance

Ansul Fire School

Amerex VSS

Amerex ISS

Amerex KP

Xtralis VESDA

Kidde WHDR Wet Chemical Fire Suppression

Kidde Dry Chemical Industrial and Open_Face Spray Booth Fire Suppression

Kidde IND Dry Chemical for Vehicle Spray Booth

Buckeye Kitchen Mister

Captive Aire CORE System

Pyrochem Kitchen Knight II

Pyrochem Monarch

MSHA 46 Certification- kept current annually



Marmic Fire & Safety, Inc.

1014 S Wall Avenue
Joplin, MO. 64801
Phone (417) 623-3584
Toll Free (800) 281-3584
Web: www.marmicfire.com

Project: Pittsburg State University Indoor Event Center
1701 S Broadway Street
Pittsburg, KS 66762
Contract Amount: \$ 198,052.00
Completed: January 2015
Contractor: Nationwide Construction
2151 N Holland Road
Mansfield, TX 76063
Contact: Reggie Parsons
Phone: (817) 473-0484

Project: Miller Professional Color
610 E. Jefferson Street
Pittsburg, KS 66762
Contract Amount: \$ 257,300.00
Completion date: July 2015
Contact: Jim Askins
Phone: 620-249-6750

Project: ADM USA
Foam system for tank farm
17700 South T Highway
Deerfield, Missouri
Contract Amount: \$ 155,754.000
Completion date: July 2015
Contact: John Baumgartner
Phone:

Project: Tamko Conference Center
211 Main Street
Joplin, Missouri
Contractor: Crossland Construction Co.
Columbus, Kansas
Contract Amount: \$171,500.00
Project status: December 8, 2015 - 75% complete
Contact:
Phone:

Project: Texas Roadhouse
3333 S. Range Line
Joplin, Missouri
Contractor: Red Dog Construction, LLC
116 S. 1st, Jenks, OK
Contract Amount: \$ 28,585.00
Completion: November 2015
Contact: Charlie Skinner
Phone: 417-761-4735

Project: FedEx Distribution Facility
Springfield, Missouri
Contractor: MW Builders
1701 N. General Bruce Drive Temple, Texas 76504-2474
Contract Amount: \$ 298,500.00
Project status: 25% complete
Contact: Charles Rombold
Phone:

Project: La-Z-Boy – Poly Storage Area
4301 Howard Bush Drive
Neosho, Missouri
Contract Amount: \$ 105,750.00
Project status: 90%
Contact: John Reid
Phone: 417-317-7824

Project: University of The Ozarks
415 North College Avenue
Clarksville, Arkansas
Contract Amount: \$ 135,837.00
Project status: 90%
Contact: Darrell W. Williams
Phone: 479-979-1207

Project: Northstar Battery
4000 Continental Way
Springfield, Missouri
Contract Amount: \$ 138,000.00
Project status: 90%
Contact: Gerry Baldwin
Phone: 417-343-4393



U.S. Department
of Transportation

**Pipeline and Hazardous
Materials Safety Administration**

East Building PHF-32
1200 New Jersey Avenue Southeast
Washington, D.C. 20590

03/19/2014

Expiration Date: 03-19-2019

Mr. Michael Teeter
President
Joplin Fire Protection, Inc.
1014 S. Wall Avenue
Joplin, MO 64801 United States

Dear Mr. Teeter:

The Office of Hazardous Materials Special Permits and Approvals has reviewed your application for approval as a cylinder requalification facility under Section 107.805 of Title 49 Code of Federal Regulations (49 CFR). At the recommendation of Cylinder Services, Inc., this office is reissuing the requalifier identification number (RIN) **B161** to your facility at 1014 S. Wall Ave., Joplin, MO for cylinder specification 3A, 3AA, 3AL, 4B, 4BA, 4BW and special permits.. This number applies to this location only and is valid until the posted expiration date above or until terminated by the Associate Administrator for Hazardous Materials Safety.

In addition to the requalification of cylinders under the relevant provisions of Sections 180.205 through 180.215 of 49 CFR, the following conditions must be met:

1. You must notify this office of any change in facility name, address, ownership, management, equipment, or testing personnel within twenty days of the change.
2. Testing must be performed by, or in the presence of, a designated hydrostatic test operator who has been observed by the authorized inspector, or who has been added to your file by addition under condition number one (1) above.
3. A copy of this approval must be maintained adjacent to the testing unit.
4. This approval is renewable every five years.
5. Copies of your application and all supporting documentation must be retained and made available to DOT upon request.

6. Each "Hazmat employee", as defined in Section 171.8, who performs a function subject to this approval, must receive appropriate training in accordance with Section 172.702.
7. All correspondence must include the requalifier identification number (RIN).



For Dr. Magdy El-Sibaie
Associate Administrator for Hazardous Materials Safety

OKLAHOMA STATE FIRE MARSHAL'S OFFICE

STATE OF OKLAHOMA CERTIFIES THAT

MARMIC FIRE & SAFETY CO INC
3168 S 108TH AVE SUITE 390

TEL SA, OK 174394

In Hereby Duly Licensed to Conduct and Operate the Business of a

LICENSED FIREWORKS MANUFACTURING COMPANY

The 'company' listed above shall have a Qualified 'U' in such appropriate category for the device to maintain a company license in the following category(ies):

PRE-INGESTIVE TYPE

This license is issued pursuant to the provisions of the rules and regulations of the Oklahoma State Fire Marshal Commission and Oklahoma Statutes. It is issued only for the premise named above and is not transferable or negotiable. The licensee must sign the application for renewal and submit it to the Oklahoma State Fire Marshal's Office, One Main Tower, Suite 200, Oklahoma City, OK 73107 within fourteen (14) days of the date of change of ownership. Failure to provide this information could result in penalties. To be in force throughout the State of Oklahoma unless revoked for cause and without penalty.

Oklahoma

Expiration Date: September 30, 2018

License Number: 417

Robert Duke
State Fire Marshal

THIS LICENSE MUST BE POSTED IN A CONSPICUOUS PLACE



Certificate of Training

STEVE MULHALL

of

MARMIC F & S

Has been certified in the Design, Installation, Maintenance & Recharge of:

Amerex IS Industrial Fire Suppression Systems

Course #FP4148-8.0 Hours

Training Location: Chicago, IL

Amerex Corporation

Trussville, Alabama USA

Trained By:

David Rice

David Rice
Training Manager



May 2017
Date of Issue

This Certificate expires THREE YEARS from date of issue and is NON TRANSFERABLE.



Certificate of Training

Steve Mulhall

of

Marmic F & S

Has been certified in the Design, Operation, Installation, and Maintenance
of:

**Amerex Vehicle Fire Suppression Systems
& Gas Detection**

Training Location: Chicago, IL

Amerex Corp.
Systems Division
PO Box 81
Trussville, Alabama 35173

David Rice

David Rice
Training Manager

May 2017

Date of Issue

This Certificate is Non Transferable - Valid Three Years from Date of Issue Eight Hours of Training



Certificate of Training

STEVE MULHALL

of

MARMIC FIRE & SAFETY

Has been certified in the Design, Installation, Maintenance & Recharge of:

Amerex Restaurant Fire Suppression Systems – KP/ZD

Course #FP6664 8.0 Hours

Training Location: Chicago, IL

Trained by:

David Rice

David Rice

Training Manager

Amerex Corporation
Trussville, Alabama USA



May 2017

Date of Issue

This Certificate expires THREE YEARS from date of issue and is NON TRANSFERABLE.

Stephen Mulhall , employee of
MARMIC Fire & Safety Company, Inc.
Pryor , OK
Completed a training course in:
KITCHEN KNIGHT II Restaurant Fire
Suppression System- Design, Installation,
Recharge & Maintenance
Training Date: November 5, 2015
Expiration Date: November 5, 2018

Be it known that

Stephen Mulhall

while employed by

MARMIC Fire & Safety Company, Inc.

Pryor, OK

Completed a training course in:

KITCHEN KNIGHT II Restaurant Fire Suppression System- Design,
Installation, Recharge & Maintenance

conducted by a Factory Authorized Instructor

This certificate is considered valid only if the above named individual is an employee of the authorized Pyro-Chem distributor listed at the above location.

Training Date: November 5, 2015

Expiration Date: November 5, 2018

Mark E. Fessenden

Mark E. Fessenden - Director, Services-Americas

**Pyro-
Chem**

Stephen Mulhall, employee of
MARMIC Fire & Safety Company, Inc.
Pryor . OK
Completed a training course in:
MONARCH Industrial Fire Suppression System-
Design, Installation, Recharge & Maintenance
Training Date: November 5, 2015
Expiration Date: November 5, 2018

Be it known that

Stephen Mulhall

While employed by

MARMIC Fire & Safety Company, Inc.

Pryor . OK

Completed a training course in:

**MONARCH Industrial Fire Suppression System- Design, Installation,
Recharge & Maintenance**

conducted by a Factory Authorized Instructor

*This certificate is considered valid only if the above named individual is an
employee of the authorized Pyro-Chem distributor listed at the above location.*

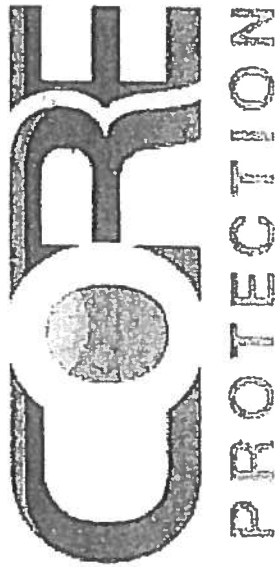
Training Date: November 5, 2015

Expiration Date: November 5, 2018

Mark E. Fessenden

Mark E. Fessenden - Director, Services-Americas

**Pyro-
Chem**



Certificate of Completion

Steve Mulhall

Completed training and certification test of the

CORE Protection Fire System

Listed to UL Standard 300

Training Date: 6/8/16

Training Location: Tulsa, OK

Bob Lilly
President & CEO



Commercial Kitchen Ventilation

Certificate of Completion

The Assurance of this Document

Certifies that

Steve Mulhall

Marmic Fire & Safety Co.

Has successfully met the requirements of the Buckeye Fire Equipment Kitchen
Mister Training Program and is hereby authorized to design, install, perform
maintenance, and recharge the Buckeye Kitchen Mister Restaurant Cooking Area
Fire Suppression System.

Educational Credit Hours Earned: 8

01/27/2020

Certification Valid Until

Kevin Boomer
President

Buckeye Fire Equipment Company

OFFICE OF THE SECRETARY OF STATE
OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I, Wayne W. Williams, as the Secretary of State of the State of Colorado, hereby certify that,
according to the records of this office,

Marmic Fire & Safety Co., Inc.

is an entity formed or registered under the law of Missouri, has complied with all
applicable requirements of this office, and is in good standing with this office. This entity has
been assigned entity identification number 20161862802.

This certificate reflects facts established or disclosed by documents delivered to this office on
paper through 12/11/2017 that have been posted, and by documents delivered to this office
electronically through 12/13/2017 @ 10:14:46.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this
official certificate at Denver, Colorado on 12/13/2017 @ 10:14:46 in accordance with applicable law.
This certificate is assigned Confirmation Number 10601136.



Secretary of State of the State of Colorado

*****End of Certificate*****
Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site. <http://www.sos.state.co.us/hiz/CertificateSearchCriteria.do> entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, <http://www.sos.state.co.us> click "Businesses, trademarks, trade names" and select "Frequently Asked Questions."



JOPLFIR-02

RCONNER

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
12/13/2017

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Specialty Risk Insurance 2023 S. Garrison Carthage, MO 64836	CONTACT NAME: Ruth Conner
	PHONE (A/C, No, Ext): FAX (A/C, No):
	E-MAIL ADDRESS: ruthconner@prevent-risk.com
	INSURER(S) AFFORDING COVERAGE NAIC #
	INSURER A: Associated Industries 23140
	INSURER B: Hartford Insurance Company 002229
	INSURER C: Scottsdale Insurance Company 41297
	INSURER D:
	INSURER E:
	INSURER F:

INSURED
Marmic Fire & Safety Co Inc Joplin Fire Protection
Marmic Fire & Safety Inc.
1014 S Wall
Joplin, MO 64801

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Primary Non-Contribu <input checked="" type="checkbox"/> Cross Liab Inc GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC <input checked="" type="checkbox"/> OTHER: Pollution/Sudden Accidental		AES1038048 02	04/01/2017	04/01/2018	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY <input checked="" type="checkbox"/> Coverage Is Primary <input checked="" type="checkbox"/> Non Contributory		37UENAO607	04/01/2017	04/01/2018	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
C	UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000		XLS0101726	04/01/2017	04/01/2018	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 Follows Form \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input checked="" type="checkbox"/> N N/A	37WEBQ5732	04/01/2017	04/01/2018	<input checked="" type="checkbox"/> PER STATUTE <input checked="" type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Certificate Holder is named as an additional insured when designated by contract. Waiver of Subrogation applies when designated by contract. 10 Day Written Cancellation Notice

CERTIFICATE HOLDER

CANCELLATION

Pikes Peak Regional Building Department
2880 International Circle
Colorado Springs, CO 80910

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE



MARMIC FIRE AND SAFETY

Toll Free (877) 906-1996
155 Airport Road, Pryor, OK 74361
1014 S. Wall, Joplin, MO 64801
OK, I.I.C. # 331 and #962

1-17-2018
Attn: Chip Taylor
City of Colorado Springs
Colorado Springs, CO

Mr. Taylor,

In regards to our FSC-B license application, Marmic Fire & Safety Co., asserts that we have all of the necessary manuals, tools, and equipment necessary to properly perform inspections, maintenance, and service associated with pre-engineered fire suppression systems and portable fire extinguishers.

Thank you.

Steve Mulhall
Marmic Fire & Safety
918-510-6013